## **FORM CT-588**

(Rev. 01/2002)

## **Athlete or Entertainer Request for Reduced Withholding**

**Purpose:** Use this form to determine if a performer or performing entity qualifies for reduced Connecticut income tax withholding. After completing both sides of this form, send it to: Department of Revenue Services, Audit Division Entertainment Withholding Section, 25 Sigourney Street, Hartford CT 06106-5032 (Fax: 860-541-4599). If the request is granted, DRS will send a **Form CT-595** to the designated withholding agent and a copy to the performer or performing entity. See **Policy Statement 2002(1)**, *Income Tax Withholding for Athletes or Entertainers*, for more information.

Performer or Performing Entity Name			Connecticut Tax Registration Number	
Number and Street			Federal Employer Identification Number	
			Telephone Number	
City/Town	State	ZIP Code	Fax Number	
Performance Information	tion			
Location of Performance				
Date(s) of Performance				
Designated Withholding Agent Nar	ing Agent Information		Connecticut Tax Registration Number	
Number and Street			Federal Employer Identification Number	
			Telephone Number	
City/Town	State	ZIP Code	Fax Number	
Nonresident Withhold	ding Rate Reduction			
Guarantee paid (contract amount)			1	
	2. Expenses (enter total from the reverse)			
		3. Net income from performance (subtract Line 2 from Line 1)		
2. Expenses (enter total	ormance (subtract Line 2 from Li	ine 1)	3	

If you have questions about Entertainment Withholding, call the Audit Division, Entertainment Withholding Section, at: **860-541-4550**Mail to:

Department of Revenue Services Audit Division, Entertainment Withholding Section 25 Sigourney Street Hartford CT 06106-5032

## **Entertainment Withholding Section Reduced Withholding Worksheet**

Expenses	For DRS Use Only	
Description	Amount	Adjustments
·		,
Total Expenses (Enter on Line 2 on the Front of This Form)		